

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**510 EAST 12TH, SUITE 1A****DES MOINES, IA 50319****Fax: (515)281-4073****www.iowa.gov/ethics****Reset Form****FORM-GB**Gift or Bequest information received
by a department or accepted by the
Governor on behalf of the state**For office use only**

Indexed _____

Audited _____

Checked _____

Computer _____

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:**DHS Glenwood Resource Center**Name of Department or Office
711 South Vine Street

Glenwood, IA 51534

Mailing Address
712-525-1683

City, State, Zip Code

Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Name _____

Mailing Address (if different from above) _____

City, State, Zip (if different from above) _____

Email Address _____

Area Code & Telephone Number (if different from above) _____

DONOR OF GIFT OR BEQUEST:

Lori Calder

Name _____

9825 E Clarksboro Dr

Liberty MO 64068-8684

Mailing Address _____

City, State, Zip Code

Area Code & Telephone Number _____

Email Address (optional) _____

3/21/2012

\$ 300.00

Date of Gift or Bequest

Amount/Value*

*value is defined as "fair market value" of item as determined by
receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

Provide amenities at Campbell Park Lake for Client ease and enjoyment

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

Statement of Affirmation:

I, Ruth Messinger affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.


Signature

3/21/2012

Date

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD510 EAST 12TH, SUITE 1A

DES MOINES, IA 50319

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DHS Glenwood Resource Center

Name of Department or Office

711 South Vine Street

Glenwood, IA 51534

Mailing Address

712-525-1683

City, State, Zip Code

Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Name

Mailing Address (if different from above)

City, State, Zip (if different from above)

Email Address

Area Code & Telephone Number (if different from above)

DONOR OF GIFT OR BEQUEST:

Ardis M. Scheffel

Name

2 Westlake Village

Council Bluffs, IA 51501

Mailing Address

City, State, Zip Code

Area Code & Telephone Number

Email Address (optional)

3/21/2012

\$ 1,000.00

Date of Gift or Bequest

Amount/Value*

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Signature

Date

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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:**DHS Glenwood Resource Center**Name of Department or Office
711 South Vine Street

Glenwood, IA 51534

Mailing Address
712-523-1683

City, State, Zip Code

Area Code & Telephone No.

CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:

Name _____

Mailing Address (if different from above) _____

City, State, Zip (if different from above) _____

Email Address _____

Area Code & Telephone Number (if different from above) _____

DONOR OF GIFT OR BEQUEST:

Baatz Farm Ind., Inc.

Name _____

206 Main St

Lester, IA 51242

Mailing Address _____

City, State, Zip Code

Area Code & Telephone Number _____

Email Address (optional) _____

3/22/2012

\$0.00

Date of Gift or Bequest

Amount/Value*

*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:


Card fronts for Client use in vocational training.

Criteria to use this form:

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Statement of Affirmation:

I, Ruth Messinger affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.


Signature

3/22/2012

Date